

Fill in this information to identify the case:

Debtor name **AMERICAN PARKING SYSTEM, INC.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) **19-02243-EAG11**

☐ Check if this is an amended filing

Official Form 202

## Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

5/15/17

X

Signature of individual signing on behalf of debtor

**MIGUEL A. CABRAL VERAS**

Printed name

**PRESIDENT**

Position or relationship to debtor

Official Form 202

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Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. <b>Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <b>23,100,000.00</b>
1b. <b>Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <b>1,075,300.62</b>
1c. <b>Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <b>24,175,300.62</b>

Part 2: Summary of Liabilities

2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <b>8,596,325.00</b>
3. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
3a. <b>Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <b>10,299,377.67</b>
3b. <b>Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <b>3,004,219.70</b>
4. <b>Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <b>21,899,922.37</b>

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## Official Form 206A/B Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1:** Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (Identify all)  
 Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1.	<b>BANCO SANTANDER OF PR OPERATING ACCOUNT ACCOUNT NUMBER: 3004949039</b>	<b>CHECKING ACCOUNT</b>	<b>9039</b>	<b>\$153,932.60</b>
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3.2.	<b>BANCO SANTANDER OF PR PAYROLL ACCOUNT ACCOUNT NUMBER: 3004949055</b>	<b>CHECKING ACCOUNT</b>	<b>9055</b>	<b>\$53.70</b>
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3.3.	<b>BANCO SANTANDER OF PR TAX ACCOUNT ACCOUNT NUMBER: 3004949047</b>	<b>CHECKING ACCOUNT</b>	<b>9047</b>	<b>\$0.00</b>
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3.4.	<b>BANCO SANTANDER OF PR ATH MOVIL ACCOUNT NUMBER: 3004997440</b>	<b>CHECKING ACCOUNT</b>	<b>7440</b>	<b>\$0.00</b>
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3.5.	<b>BANCO SANTANDER OF PR TAXES ACCOUNT ACCOUNT NUMBER: 3004997475</b>	<b>CHECKING ACCOUNT</b>	<b>7475</b>	<b>\$2,964.97</b>
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3.6.	<b>BANCO SANTANDER OF PR PAYROLL ACCOUNT ACCOUNT NUMBER: 3004997467</b>	<b>CHECKING ACCOUNT</b>	<b>7467</b>	<b>\$0.00</b>
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3.7. BANCO SANTANDER OF PR  
OPERATING ACCOUNT  
ACCOUNT NUMBER: 3004997459 CHECKING ACCOUNT 7459 \$31,619.58

3.8. BANCO SANTANDER OF PR  
LOCK BOX  
ACCOUNT NUMBER: 3004941186 CHECKING ACCOUNT 1186 \$34.19

4. **Other cash equivalents (Identify all)**

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$188,605.04

**Part 2: Deposits and Prepayments**

6. **Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**  
Description, including name of holder of deposit

7.1. AAA UTILITY PASEO SAN JUAN \$740.00

7.2. AAA UTILITY DEPOSIT DEL PARQUE PROPERTY \$180.00

7.3. PREPA UTILITY DEPOSIT DEL PARQUE PROPERTY \$1,100.00

7.4. PREPA UTILITY DEPOSIT LOT ON ASHFORD AVENUE \$175.00

7.5. PREPA UTILITY DEPOSIT PASEO SAN JUAN \$8,000.00

7.6. PREPA UTILITY DEPOSIT MONACILLOS \$800.00

7.7. ATT AND PRTC SECURITY DEPOSIT DEL PARQUE AND PASEO SAN JUAN \$12,600.00

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**  
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$23,595.00

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**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 366,271.09 - 0.00 = .... \$366,271.09  
face amount doubtful or uncollectible accounts

11a. 90 days old or less: 8,539.49 - 0.00 = .... \$8,539.49  
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$374,810.58**

**Part 4: Investments**

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.  
☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.  
☐ Yes Fill in the information below.

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

**General description**

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

**Net book value of debtor's interest**  
(Where available)

**Valuation method used for current value**

**Current value of debtor's interest**

47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

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48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

<b>PARKING EQUIPMENT AT COST</b>	<b>\$223,780.00</b>	<b>COST</b>	<b>\$223,780.00</b>
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51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$223,780.00**

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No

☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No

☐ Yes

**Part 9: Real property**

54. **Does the debtor own or lease any real property?**

☐ No. Go to Part 10.

☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

**Description and location of property**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

**Nature and extent of debtor's interest in property**

**Net book value of debtor's interest (Where available)**

**Valuation method used for current value**

**Current value of debtor's interest**

55.1. **PASEO SAN JUAN - ELEVEN-STORY PARKING BUILDING WITH PERMITS FOR 840 CARS LOCATED AT ISLA VERDE AVENUE, CANGREJOS ARriba WARD, CAROLINA, PUERTO RICO CADASTER NUMBER 041-087-017-17-901 APPRAISED VALUE AS OF FEBRUARY 20, 2019**

**Fee simple**

**\$0.00**

**\$20,100,000.00**

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55.2. DEL PARQUE  
BUILDING - THREE  
(3) STORY  
CONCRETE OFFICE  
BUILDING LOCATED  
AT 603 DEL PARQUE  
STREET, SANTURCE,  
SAN JUAN, PUERTO  
RICO  
CADASTER  
NUMBER:  
040-080-433-39-001  
APPRAISED VALUE  
AS OF 2014

Fee simple	\$0.00	\$400,000.00
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55.3. MONACILLOS LOTS -  
THREE (3) PARCEL  
OF LAND (LOTS)  
USED AS PARKING  
FACILITY LOCATED  
AT NORTHEAST  
CORNER OF STATE  
ROAD 177,  
MONACILLOS  
WARD, RIO  
PIEDRAS, PUERTO  
RICO  
CADASTER  
NUMBER:  
114-018-625-08-000/0  
9-000/07-000  
AS PER PURCHASE  
OPTION  
AGREEMENT

Fee simple	\$0.00	\$2,600,000.00
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56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
Copy the total to line 88.

**\$23,100,000.00**

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No  
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.

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☐ Yes Fill in the information below.

Current value of  
debtor's interest

71. **Notes receivable**  
Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**  
Description (for example, federal, state, local)

**DEFERRED TAX ASSET**

Tax year \_\_\_\_\_ **\$264,510.00**

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples:* Season tickets, country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$264,510.00**

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

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**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$188,605.04</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$23,595.00</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$374,810.58</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$0.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$0.00</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$223,780.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$23,100,000.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$0.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>+</b> <b>\$264,510.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$1,075,300.62</b>	<b>+ 91b. \$23,100,000.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$24,175,300.62</b>

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Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	
<b>\$8,591,512.00</b>	<b>\$20,100,000.00</b>

**2.1 767 LENDER LLC**  
 Creditor's Name  
**767 FIFTH AVENUE**  
**12th FLOOR**  
**New York, NY 10153**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**07/29/2016**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
- ☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien  
**REAL PROPERTY PASEO SAN JUAN PARKING BUILDING LISTED IN SCHEDULE A/B**

Describe the lien  
**MORTGAGE, UCC**

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?

- ☐ No
- ☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

- Check all that apply
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**2.2 CRIM**  
 Creditor's Name  
**PO BOX 195387**  
**San Juan, PR 00919-5387**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**2010-2019**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien  
**MONACILLOS PARKING LOTS LISTED IN SCHEDULE A/B**

Describe the lien  
**REAL PROPERTY TAX - PRINCIPAL & INTEREST**

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?

- ☒ No
- ☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:  
 Check all that apply

**\$4,813.00**

**\$2,170,000.00**

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- ☒ No  
☐ Yes. Specify each creditor,  
including this creditor and its relative  
priority
- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

3 Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$8,596,325.0**  
**0**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did  
you enter the related creditor?

Last 4 digits of  
account number for  
this entity

Fill in this information to identify the case:

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## Official Form 206E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

#### Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>CRIM PO BOX 195387 San Juan, PR 00919-5387</b>	<b>\$150,506.57</b>	<b>\$0.00</b>
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred <b>2011-2015</b>		
	Basis for the claim: <b>PERSONAL PROPERTY TAXES</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address <b>DEPARTMENT OF TREASURY BANKRUPTCY SECTION PO BOX 9024140 OFFICE 424 B San Juan, PR 00902-4140</b>	<b>\$2,179,200.00</b>	<b>\$2,179,200.00</b>
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred		
	Basis for the claim: <b>TAXES</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **AMERICAN PARKING SYSTEM, INC.**  
Name

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**19-02243-EAG11**

2.3

Priority creditor's name and mailing address  
**INTERNAL REVENUE SERVICE  
PO BOX 7346  
Philadelphia, PA 19101-7346**

As of the petition filing date, the claim is:  
*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$2,732,895.78**

**\$2,732,895.78**

Date or dates debt was incurred  
**12/31/2005**

Basis for the claim:  
**PAYROLL TAXES (VARIOUS YEARS)**

Last 4 digits of account number

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2.4

Priority creditor's name and mailing address  
**MUNICIPIO DE SAN JUAN  
PO BOX 70179  
San Juan, PR 00936-8179**

As of the petition filing date, the claim is:  
*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$306,598.63**

**\$306,598.63**

Date or dates debt was incurred

Basis for the claim:  
**PATENTS AND SALES AND USES TAX**

Last 4 digits of account number

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2.5

Priority creditor's name and mailing address  
**PR DEPARTMENT OF LABOR  
PO BOX 195540  
San Juan, PR 00919-5540**

As of the petition filing date, the claim is:  
*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$522,957.85**

**\$37,113.33**

Date or dates debt was incurred

Basis for the claim:  
**DISABILITY INSURANCE**

Last 4 digits of account number

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2.6

Priority creditor's name and mailing address  
**PR DEPARTMENT OF LABOR  
PO BOX 195540  
San Juan, PR 00919-5540**

As of the petition filing date, the claim is:  
*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$4,191,093.53**

**\$381,986.04**

Date or dates debt was incurred

Basis for the claim:  
**UNEMPLOYMENT INSURANCE**

Last 4 digits of account number

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No  
☐ Yes

Debtor **AMERICAN PARKING SYSTEM, INC.**  
Name

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19-02243-EAG11

<p>2.7 Priority creditor's name and mailing address</p> <p><b>STATE INSURANCE FUND CORPORATION</b> <b>PO BOX 365028</b> <b>San Juan, PR 00936-5028</b></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>WORKMEN COMPENSATION INSURANCE</b></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>\$216,125.31</b></p> <p><b>\$216,125.31</b></p>
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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
<p>3.1 Nonpriority creditor's name and mailing address</p> <p><b>AGA CPA'S &amp; ADVISORS</b> <b>801 INTERNATIONAL PKWY</b> <b>Lake Mary, FL 32746-5000</b></p> <p>Date(s) debt was incurred <u>2017</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>PROFESSIONAL SERVICES</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$30,000.00</b></p>
<p>3.2 Nonpriority creditor's name and mailing address</p> <p><b>AUT DE ACUEDUCTOS Y ALCANTARILLADOS</b> <b>PO BOX 7066</b> <b>San Juan, PR 00916-7066</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>WATER AND SEWER SERVICES</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>Unknown</b></p>
<p>3.3 Nonpriority creditor's name and mailing address</p> <p><b>BRENDA VIVES</b> <b>601 PONCE DE LEON AVENUE</b> <b>BANCO COOPERATIVO SUITE 623</b> <b>San Juan, PR 00917</b></p> <p>Date(s) debt was incurred <u>2019</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>LAWSUIT</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>Unknown</b></p>
<p>3.4 Nonpriority creditor's name and mailing address</p> <p><b>DE LAGE LANDEN FINANCIAL SERVICES INC</b> <b>ATT. L LEVIN</b> <b>111 OLD EAGLE SCHOOL ROAD</b> <b>Wayne, PA 19087</b></p> <p>Date(s) debt was incurred <u>2019</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>LEASE ARREARS</u> <u>PHOTOCOPIER</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$6,649.76</b></p>
<p>3.5 Nonpriority creditor's name and mailing address</p> <p><b>DEYA ELEVATOR SERVICE INC</b> <b>PO BOX 362411</b> <b>San Juan, PR 00936-2411</b></p> <p>Date(s) debt was incurred <u>2019</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>ELEVATOR MAINTENANCE</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$1,772.86</b></p>

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3.6	<p>Nonpriority creditor's name and mailing address  <b>E RAMIREZ ASSOCIATES LLC</b>  <b>PO BOX 11741</b>  <b>San Juan, PR 00922</b></p> <p>Date(s) debt was incurred <u>2018</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>PROFESSIONAL SERVICES</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$8,500.00</b></p>
3.7	<p>Nonpriority creditor's name and mailing address  <b>FEDERICO CALAF</b>  <b>800 JOSE MARTIN STREET</b>  <b>San Juan, PR 00907</b></p> <p>Date(s) debt was incurred <u>2016</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>PROFESSIONAL SERVICES</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$17,000.00</b></p>
3.8	<p>Nonpriority creditor's name and mailing address  <b>FELIX M GARCIA</b>  <b>1348 OBERTA STREET</b>  <b>San Juan, PR 00908</b></p> <p>Date(s) debt was incurred <u>2013</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>LAWSUIT SETTLEMENT</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$60,000.00</b></p>
3.9	<p>Nonpriority creditor's name and mailing address  <b>GELCY Z PIRIZ RAVEL</b>  <b>JARDINES DEL MEDITERRANEO</b>  <b>466 JARDIN DON JUAN STREET</b>  <b>Toa Alta, PR 00953</b></p> <p>Date(s) debt was incurred <u>2019</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>LAWSUIT SETTLEMENT</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$6,333.32</b></p>
3.10	<p>Nonpriority creditor's name and mailing address  <b>HOSPITAL DAMAS INC</b>  <b>2213 PONCE BY PASS</b>  <b>Ponce, PR 00717</b></p> <p>Date(s) debt was incurred <u>2018</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>RENT ARREARS</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$105,000.00</b></p>
3.11	<p>Nonpriority creditor's name and mailing address  <b>JESUS LUGO GUERRERO</b>  <b>430 BARTOLOME LAS CASAS</b>  <b>San Juan, PR 00915</b></p> <p>Date(s) debt was incurred <u>          </u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input checked="" type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>LABOR CLAIM SJ2018CV01094</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$25,804.20</b></p>
3.12	<p>Nonpriority creditor's name and mailing address  <b>JOSEAN CLAUDIO LAGUNA C/O</b>  <b>PR DEPARTMENT OF LABOR</b>  <b>PO BOX 71592</b>  <b>San Juan, PR 00936-8692</b></p> <p>Date(s) debt was incurred <u>          </u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply</i></p> <p><input checked="" type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>LABOR CLAIM A6-D1-DP-0148-14</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$3,198.00</b></p>

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3 13	Nonpriority creditor's name and mailing address <b>JUAN MARTINEZ TAPIA C/O PR DEPARTMENT OF LABOR PO BOX 71592 San Juan, PR 00936-8692</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u><b>LABOR CLAIM KPE2015-2948</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21,454.20</b>
3 14	Nonpriority creditor's name and mailing address <b>MARINO DE LEON PEREZ 1 SAN ANDRES STREET BARRIO CAMBUTE Carolina, PR 00985</b>  Date(s) debt was incurred <u><b>2016</b></u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>LOANS</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21,000.00</b>
3 15	Nonpriority creditor's name and mailing address <b>MELVYN JOSE DIAZ COND. VILLAS DEL PARQUE APTO 17 G San Juan, PR 00909</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u><b>LABOR CLAIM AC-15-427</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,500.00</b>
3 16	Nonpriority creditor's name and mailing address <b>METRO SANTURCE INC PO BOX 195579 San Juan, PR 00919-5579</b>  Date(s) debt was incurred <u><b>11/30/2011</b></u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>LEASE ARREARS</b></u>  Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<b>\$105,000.03</b>
3 17	Nonpriority creditor's name and mailing address <b>NEW CENTURY FINANCE CORP PO BOX 12011 San Juan, PR 00914</b>  Date(s) debt was incurred <u><b>2019</b></u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>FINANCING ARREARS</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$18,142.44</b>
3 18	Nonpriority creditor's name and mailing address <b>OFICINA ESTATAL CONSERVACION HISTORICA PO BOX 9023935 San Juan, PR 00902-3935</b>  Date(s) debt was incurred <u><b>2011</b></u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u><b>LAWSUIT</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$564,788.72</b>
3 19	Nonpriority creditor's name and mailing address <b>OSVALDO R GONZALEZ, ESQ 2 STREET 32 PASEO ALTO San Juan, PR 00926-5917</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>PROFESSIONAL SERVICES AND LOANS</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$922,188.00</b>

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3.20	Nonpriority creditor's name and mailing address <b>PEDRO A LLOVET-DIAZ ESQ</b> <b>URB CARIBE 1581</b> <b>CALLE CAVALIERI ST 1</b> <b>San Juan, PR 00927</b> Date(s) debt was incurred <u>03/01/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PROFESSIONAL SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,000.00</b>
3.21	Nonpriority creditor's name and mailing address <b>PELLOT GONZALEZ TAX ATTORNEYS &amp; COUNSELO</b> <b>HATO REY CENTER SUITE 903</b> <b>268 JUAN PONCE DE LEON AVE</b> <b>San Juan, PR 00918</b> Date(s) debt was incurred <u>03/01/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LAWSUIT SETTLEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$450,000.00</b>
3.22	Nonpriority creditor's name and mailing address <b>PPG ARCHITECTURAL CO</b> <b>630 CALLE FERIA</b> <b>Carolina, PR 00987</b> Date(s) debt was incurred <u>2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PROFESSIONAL SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,252.80</b>
3.23	Nonpriority creditor's name and mailing address <b>PR ELECTRIC POWER AUTHORITY</b> <b>PO BOX 364267</b> <b>San Juan, PR 00936</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ELECTRIC POWER SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.24	Nonpriority creditor's name and mailing address <b>RUTH CUEVAS ROCHE</b> <b>1159 URB. SAN AGUSTIN</b> <b>San Juan, PR 00923</b> Date(s) debt was incurred <u>2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>LABOR CLAIM KPE2015-3624</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,827.10</b>
3.25	Nonpriority creditor's name and mailing address <b>SAN FRANCISCO HEALTH SYSTEM INC</b> <b>PO BOX 29025</b> <b>San Juan, PR 00929-0025</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>RENT ARREARS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$26,320.00</b>
3.26	Nonpriority creditor's name and mailing address <b>SHRED-IT USA LLC</b> <b>PO BOX 364527</b> <b>San Juan, PR 00936-4527</b> Date(s) debt was incurred <u>2014</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PROFESSIONAL SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,797.70</b>

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3 27	Nonpriority creditor's name and mailing address <b>STATE INSURANCE FUND CORPORATION</b> <b>PO BOX 365028</b> <b>San Juan, PR 00936-5028</b> Date(s) debt was incurred <u>2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>WORKMEN COMPENSATIO INSURANCE</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$565,780.97
3 28	Nonpriority creditor's name and mailing address <b>SYLVIA IVETTE MARTINEZ</b> <b>PO BOX 50606</b> <b>Bayamon, PR 00959</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>LAWSUIT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3 29	Nonpriority creditor's name and mailing address <b>UNIVERSAL FINANCE INC</b> <b>PO BOX 70380</b> <b>San Juan, PR 00936-8380</b> Date(s) debt was incurred <u>2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FINANCE CHARGES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,448.40
3 30	Nonpriority creditor's name and mailing address <b>WILLY RAMOS DIAZ</b> <b>VILLA CAROLINA</b> <b>530 STREET BLOQUE 196 2</b> <b>Carolina, PR 00985</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>LABOR CLAIM AC-13-540</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,461.20

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
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**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1	5a.	\$	Total of claim amounts <b>10,299,377.67</b>
5b. Total claims from Part 2	5b.	+	<b>3,004,219.70</b>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$	<b>13,303,597.37</b>

Fill in this information to identify the case:

Debtor name **AMERICAN PARKING SYSTEM, INC.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) **19-02243-EAG11**

☐ Check if this is an amended filing

## Official Form 206G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

**MANAGEMENT AGREEMENT FOR THE OPERATION OF THE PARKING FACILITIES ON THE PREMISES OF THE HOTEL LOCATED AT PONCE DE LEON AVENUE, MIRAMAR, SAN JUAN, PUERTO RICO**

State the term remaining

**SERVICE PROVIDER MONTH TO MONTH**

List the contract number of any government contract

**COURTYARD BY MARRIOTT SAN JUAN MIRAMAR  
801 PONCE DE LEON AVENUE  
San Juan, PR 00907**

2.2. State what the contract or lease is for and the nature of the debtor's interest

**LEASE AGREEMENT COMMERCIAL SPACE**

State the term remaining

**EXPIRES ON JANUARY 2021**

List the contract number of any government contract

**ENTERPRISES GROUP P 199  
2484 MARGINAL CELESTE  
Carolina, PR 00979**

2.3. State what the contract or lease is for and the nature of the debtor's interest

**DEED OF GROUND LEASE AND CONCESSION AGREEMENT PARCEL OF LAND LOCATED AT HATO DE CANGREJOS ARRIBA WARD, CAROLINA, PUERTO RICO**

State the term remaining

**CONCESSIONAIRE EXPIRES ON MARCH 1, 2019**

**ESJ RESORT LLC  
6063 ISLA VERDE AVENUE  
Carolina, PR 00979**

First Name

Middle Name

Last Name

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract

2.4.	State what the contract or lease is for and the nature of the debtor's interest	<b>LEASE AGREEMENT COMMERICAL SPACE (CHILI'S) AT PASEO SAN JUAN PARKING BUILDING CAROLINA, PUERTO RICO</b>	
	State the term remaining	<b>EXPIRES ON NOVEMBER 2027</b>	<b>INTERNATIONAL RESTAURANT SERVICES INC EDIF COLGATE PALMOLIVE SUITE 308 METRO OFFICE Guaynabo, PR 00968-1705</b>
	List the contract number of any government contract		

2.5.	State what the contract or lease is for and the nature of the debtor's interest	<b>LEASE AGREEMENT PARKING LOT ON THE PREMISES OF THE NORMANDIE HOTEL LOCATED AT PUERTA DE TIERRA, SAN JUAN, PUERTO RICO</b>	
	State the term remaining	<b>LESSEE EXPIRES ON APRIL 30, 2020</b>	<b>INTERRA SKY NORMANDIE, LLC 2400 AUGUSTA DRIVE 330 Houston, TX 77057</b>
	List the contract number of any government contract		

2.6.	State what the contract or lease is for and the nature of the debtor's interest	<b>LEASE AGREEMENT PARKING LOT AT THE PREMISES OF THE RECREATION AREA KNOW AS "EL ESCAMBRON" OR "PARQUE DEL TERCER MILENIO" LOCATED AT SAN JUAN, PUERTO RICO</b>	
	State the term remaining	<b>LESSEE MONTH TO MONTH</b>	<b>MUNICIPIO DE SAN JUAN PO BOX 70179 San Juan, PR 00936-8179</b>
	List the contract number of any government contract		

Debtor 1 **AMERICAN PARKING SYSTEM, INC.**

Case number (if known) **19-02243-EAG11**

First Name

Middle Name

Last Name

**Additional Page if You Have More Contracts or Leases**

**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.7. State what the contract or lease is for and the nature of the debtor's interest

**CONCESSION AGREEMENT FOR THE OPERATION OF THE PARKING FACILITIES ON THE PREMISES OF THE HOTEL CONDADO PLAZA LOCATED AT ASHFORD AVENUE, SAN JUAN, PUERTO RICO**

State the term remaining

**CONCESSIONAIRE MONTH TO MONTH**

List the contract number of any government contract

**POSADAS DE PR ASSOCIATES, LLC  
999 ASHFORD AVENUE  
San Juan, PR 00907**

2.8. State what the contract or lease is for and the nature of the debtor's interest

**CONCESSION AGREEMENT FOR THE OPERATION OF THE PARKING FACILITIES ON THE PREMISES OF THE HOTEL LOCATED AT RIO MAR BOULEVARD, RIO GRANDE, PUERTO RICO**

State the term remaining

**CONCESSIONAIRE EXPIRES ON DECEMBER 1, 2019**

List the contract number of any government contract

**RIO MAR RESORT-WHG HOTEL PROPERTY, LLC  
6000 RIO MAR BOULEVARD  
Rio Grande, PR 00745**

2.9. State what the contract or lease is for and the nature of the debtor's interest

**MANAGEMENT AGREEMENT FOR THE OPERATION OF THE PARKING FACILITIES OF SAN JUAN WATER AND BEACH CLUB HOTEL**

State the term remaining

**EXPIRES ON FEBRUARY 2023**

List the contract number of any government contract

**SAN JUAN WATER AND BEACH CLUB HOTEL INC  
2 TARTAK STREET  
ISLA VERDE  
Carolina, PR 00979**

2.10. State what the contract or lease is for and the nature of the debtor's interest

**LEASE AGREEMENT COMMERCIAL SPACE**

State the term remaining

**EXPIRES ON**

**SOLUWISE  
URB EL VETERANO  
A STREET 204 SECOND FLOOR  
San Juan, PR 00926**

Debtor 1 **AMERICAN PARKING SYSTEM, INC.**

First Name

Middle Name

Last Name

Case number (if known)

19-02243-EAG11

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract

DECEMBER 2031

2.11. State what the contract or lease is for and the nature of the debtor's interest

OPTION TO SELL  
PARCEL OF LAND  
LOCATED AT URB.  
REPARTO VILLA SEIN,  
MONACILLOS WARD,  
RIO PIEDRAS, PUERTO  
RICO

State the term remaining

SELLER  
EXPIRES ON  
SEPTEMBER 6, 2019

List the contract number of any government contract

UNIVERSIDAD INTERAMERICANA DE PR INC  
PO BOX 363255  
San Juan, PR 00936-3255

Fill in this information to identify the case:

Debtor name **AMERICAN PARKING SYSTEM, INC.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) **19-02243-EAG11**

☐ Check if this is an amended filing

## Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

### 1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 MIGUEL A. CABRAL VERAS	6 SUCHVILLE Guaynabo, PR 00970	767 LENDER LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____